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<b>PATENT – POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>		Patent Number <b>6,480,485</b> Issue Date <b>November 12, 2002</b> First Named Inventor <b>Hannu Kari</b> Title <b>PACKET RADIO NETWORK WITH CHARGING INFORMATION</b> Attorney Docket No. <b>39700-521N01US/NC10721US</b>									
I hereby revoke all previous powers of attorney given in the above-identified patent. <input type="checkbox"/> A Power of Attorney is submitted herewith. OR <input checked="" type="checkbox"/> I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) with respect to the patent identified above, and to transact all business in the United States Patent and Trademark Office connected therewith: <div style="float: right; border: 1px solid black; padding: 2px; margin-top: 5px;">64046</div>											
OR <input type="checkbox"/> I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) with respect to the patent identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Practitioner(s) Name</th> <th style="width: 25%;">Registration Number</th> </tr> </thead> <tbody> <tr> <td style="height: 40px;"></td> <td></td> </tr> </tbody> </table>		Practitioner(s) Name	Registration Number			<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Practitioner(s) Name</th> <th style="width: 25%;">Registration Number</th> </tr> </thead> <tbody> <tr> <td style="height: 40px;"></td> <td></td> </tr> </tbody> </table>		Practitioner(s) Name	Registration Number		
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Please recognize or change the correspondence address for the above-identified patent to: <input checked="" type="checkbox"/> The address associated with the above-mentioned Customer Number. OR <input type="checkbox"/> The address associated with Customer Number:											
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I am the: <input type="checkbox"/> Inventor, having ownership of the patent. OR <input checked="" type="checkbox"/> Patent owner. Statement under 37 CFR 3.73(b) (Form PTO/SB/95) submitted herewith or filed on											
SIGNATURE of Inventor or Patent Owner											
Signature		Date									
Name <b>Gordon Huang</b>		<b>8/26/09</b> Telephone <b>(858) 208-9888</b>									
Title and Company <b>Sr. IPR Manager, Nokia Corporation</b>											
NOTE: Signatures of all the inventors or patent owners of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.											
<input type="checkbox"/> *Total of <u>1</u> forms are submitted.											

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4). Dated <b>8/26/09</b> Signature: <b>Karen Marcus</b>	
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**STATEMENT UNDER 37 CFR 3.73(b)**

Applicant/Patent Owner: Nokia Corporation

Application No./Patent No.: 6,480,485

Filed/Issue Date: November 12, 2002

Titled: PACKET RADIO NETWORK WITH CHARGING INFORMATION COLLECTED BY NODES AND  
FORWARDED TO BILLING CENTER

Nokia Corporation, a Corporation  
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest in;
  2. ☐ an assignee of less than the entire right, title, and interest in  
(The extent (by percentage) of its ownership interest is \_\_\_\_\_ %); or
  3. ☐ an assignee of an undivided interest in the entirety of (a complete assignment from one of the joint inventors was made)  
the patent application/patent identified above by virtue of either:
- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was  
recorded in the United States Patent and Trademark Office at Reel 9544  
Frame 0741, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows
1. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at  
Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.
  2. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at  
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  3. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at  
Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.
- ☐ Additional documents in the chain of title are listed on a supplemental sheet(s).
- ☐ As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the  
assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment  
Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Gordon Huang  
Signature  
Gordon Huang  
Printed or Typed Name

8/18/09  
Date  
Sr. IPR Manager  
Title

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing  
system in accordance with § 1.6(e)(4).

Dated: 8/26/09

Signature: Karen Marcus (Karen Marcus)

# "FEE ADDRESS" INDICATION FORM

Address to:  
Mail Stop M Correspondence  
Commissioner for Patents  
P.O. Box 1480  
Alexandria, VA 22313-1450

Fax to:  
571-273-6500

- OR -

**INSTRUCTIONS:** The issue fee must have been paid for application(s) listed on this form. In addition, only an address represented by a Customer Number can be established as the fee address for maintenance fee purposes (hereafter, fee address). A fee address should be established when correspondence related to maintenance fees should be mailed to a different address than the correspondence address for the application. When to check the first box below: If you have a Customer Number to represent the fee address. When to check the second box below: If you have no Customer Number representing the desired fee address, in which case a completed Request for Customer Number (PTO/SB/125) must be attached to this form. For more information on Customer Numbers, see the Manual of Patent Examining Procedure (MPEP) § 403.

For the following listed application(s), please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with:

☒ Customer Number: 00197

OR

☐ The attached Request for Customer Number (PTO/SB/125) form.

PATENT NUMBER (if known)	APPLICATION NUMBER
6,480,485	

Completed by (check one):

☐ Applicant/Inventor

☐ Attorney or Agent of record

(Reg. No.)

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed.  
(Form PTO/SB/96)

☒ Assignee recorded at Reel 9544 Frame 0741

  
Signature  
Gordon Huang  
Typed or printed name  
(858) 208-9888  
Requester's telephone number  
8/18/09  
Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of 1 forms are submitted.

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Dated: 8/18/09

Signature: Karen Marcus Karen Marcus